



IDAHO DEPARTMENT OF
HEALTH & WELFARE

C.L. "BUTCH" OTTER, Governor
RICHARD M. ARMSTRONG – Director

DEBBY RANSOM, R.N., R.H.I.T – Chief
BUREAU OF FACILITY STANDARDS
3232 Elder Street
P.O. Box 83720
Boise, Idaho 83720-0036
PHONE: (208) 334-6626
FAX: (208) 364-1888
E-mail: fsb@idhw.state.id.us

February 16, 2007

Debra Kamphaus, Administrator
Happy Kamper
11217 Barden Tower Dr
Boise, ID 83709

Dear Ms. Kamphaus:

On February 14, 2007, a life safety code survey was conducted at Happy Kamper. The facility was found to be providing a safe environment for its residents.

The enclosed form, stating no core issue deficiencies were cited during the survey, is for your records only and need not be returned.

Please bear in mind that non-core issue deficiencies were identified on the punch list, a copy of which was reviewed and left with you during the exit conference. The completed punch list form and accompanying proof of resolution (e.g., receipts, pictures, policy updates, etc.) are to be submitted to this office by March 16, 2007.

Should you have any questions about our visit, please contact me at (208) 334-6626.

Sincerely,

A handwritten signature in black ink, appearing to read 'M. Grimes', with a long horizontal flourish extending to the right.

MARK GRIMES
Supervisor
Facility Fire Safety & Construction Program

MG/slc

Enclosure



IDAHO DEPARTMENT OF
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BUREAU OF FACILITY STANDARDS
3232 Elder Street
P.O. Box 83720
Boise, ID 83720-0036
PHONE 208-334-6626
FAX 208-364-1888

June 13, 2007

CERTIFIED MAIL #: 7003 0500 0003 1967 0810

Debra Kamphaus, Administrator
Happy Kamper
11217 Barden Tower Dr
Boise, ID 83709

Dear Ms. Kamphaus:

On February 14, 2007 a Life Safety Code Survey was conducted at your facility. We have not yet received a response from the facility for that survey, which was due by **March 16, 2007**.

Enclosed is another copy of the Punch List identifying non-core issue deficiencies cited during the survey. Please submit evidence of resolution to our office on or before **June 22, 2007**.

Should you have questions regarding the survey or developing a response, please call our office at (208) 334-6626.

Sincerely,

Mark Grimes
(cm)

MARK GRIMES
Supervisor
Facility Fire/Life Safety & Construction Program

JS/slc

Enclosure

Bureau of Facility Standards

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 13R784	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - ENTIRE BUILDING B. WING _____	(X3) DATE SURVEY COMPLETED 02/14/2007
NAME OF PROVIDER OR SUPPLIER HAPPY KAMPER		STREET ADDRESS, CITY, STATE, ZIP CODE 11217 BARDEN TOWER DR BOISE, ID 83709		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
R 000	<p>Initial Comments</p> <p>The facility was found to be in substantial compliance with the fire and life safety requirements of the Rules for Residential or Assisted Living Facilities in Idaho. No core deficiencies were cited during the standard fire/life safety survey conducted on February 14, 2007.</p> <p>The surveyor conducting the survey was:</p> <p>Eric Mundell REHS Health Facility Surveyor Facility Fire/Life Safety & Construction Program</p>	R 000		

Bureau of Facility Standards

TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

STATE FORM

6899

EP9H21

If continuation sheet 1 of 1



BUREAU OF FACILITY STANDARDS
P.O. Box 83720
Boise, ID 83720-0036
(208) 334-6626 fax: (208) 364-1888

ASSISTED LIVING
Non-Core Issues
Punch List

Facility Name Happy Kamper	Physical Address 11217 Bardon Tower	Phone Number 376-7782
Administrator Debby Kamphaus	City Boine	ZIP Code 83709
Survey Team Leader Eric Munchell	Survey Type Fire/Life Safety	Survey Date 2/14/07

[illegible]

Response Required Date

Signature of Facility Representative

Date Signed _____

March 16, 2007

X Kelly Kamphaer

9-14-05